



The Journal

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April 6, 2017

NSAB Proclaims April as Sexual Assault Awareness and Prevention Month



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Navy Advises Early Preparation For PCS Moves

By Suzanna Brugler
Naval Supply Systems Command
Global Logistics Support
Office of Corporate Communications

In a message released March 24, Naval Supply Systems Command Global Logistics Support (NAVSUP GLS) advised Sailors and family members that peak season for household goods (HHG) moves will run from May 15 to August 31 this year.

During this time, almost 55 percent of all Department of Defense household goods moves for the year will be executed. Sailors expecting to move during this time should prepare as early as possible.

This year is especially critical due to the continuing resolution (CR) for fiscal year 2017, which results in permanent change of station (PCS) orders being issued later than normal.

“Early initiative and flexibility are key for a successful household goods move during the summer peak season,” said Deborah McGlennon, NAVSUP GLS Household Goods program manager. “The sooner you submit your application, orders and all the required signed documents, the more control you will have over your move.”

To alleviate some stress, the Navy HHG office recommends that Sailors start their move application process in advance of receiving their PCS orders. While Sailors can start the application online as soon as possible, they cannot ‘submit’ the application forward until they have received official PCS orders. Ideally, Sailors will have the online application almost complete and be ready to review and submit immediately upon receiving PCS orders.

To start the process, Sailors and family members are advised to go to <http://www.navsup.navy.mil/household> to review various “how-to” guides for using the Defense Personal Property System (DPS) and basic entitlement information.

Sailors should then go to the <http://www.move.mil>, obtain a login and password for DPS, and start their application.

Once an application has been created, signed, and the required documents have been uploaded into DPS — documents including official military PCS orders, signed forms DD 1299 and DD 1797, and any other required specialized documents, such as power of attorney — the move application can then be submitted.

After an application has been submitted, Sailors should check the status of their application frequently to ensure a moving company, pack-out date, and pick-up date are assigned. Sailors should expect to receive an automated email when their HHG shipment has been assigned to a moving company. The assigned moving company is required to initiate contact to arrange a pre-move survey.

“It is important that our Sailors contact their local personal property or HHG counseling office if they have not received notification two weeks prior to their requested first pack date,” said McGlennon.

The average lead time for Navy personal property offices to process move applications during peak season increases to four weeks from the average two weeks outside of peak season. Therefore, Sailors may be asked to be flexible and adjust their requested pick-up date or conduct a personally procured move (PPM) if a moving company is not available.

Sailors may also designate a releasing agent, such as a spouse or family member, if they are not available at the time of the move. Releasing agents act on the service member’s behalf, should be available for both the pack-out and pick-up appointments, and will be required to sign the required moving documents.

Sailors do not need legal assistance to designate a releasing agent. A note signed by the moving service member stating the name, phone number and email of the releasing agent is sufficient for designation.

Sailors are also advised they should not submit notice to vacate their residence prior to discussing moving dates with their local HHG office and, if possible, prior to their shipment being accepted by a moving company.

“It is important our Sailors avoid terminating

their rental and lease agreements until a firm pack-out and pick-up date have been agreed upon and confirmed with the assigned moving company,” said McGlennon.

To assist with the moving process, the Navy HHG program is offering webinars to provide information on basic PCS entitlements. The scheduled topics and time of the webinars are as follows (all times are given in PDT):

- First time movers — basic terminology, what can be shipped, responsibilities, etc.: April 11 at 7 a.m. and 6 p.m.; May 9 at 7 a.m., 2 p.m. and 6 p.m.; and June 13 at 7 a.m. and 2 p.m.
- Retiree moving information — final move preparation, storage: April 18 at 7 a.m. and 6 p.m.; May 16 at 7 a.m., 2 p.m. and 6 p.m.; and June 20 at 7 a.m. and 2 p.m.
- Overseas information restrictions — for overseas locations, storage: April 19 at 7 a.m. and 6 p.m.; May 17 at 7 a.m., 2 p.m. and 6 p.m.; and June 21 at 7 a.m. and 2 p.m.
- Personnel separating from the Navy — information on final move entitlements: April 25 at 7 a.m. and 6 p.m.; May 23 at 7 a.m., 2 p.m. and 6 p.m.; and June 27 at 7 a.m. and 2 p.m.
- Personally procured moves (PPM) — how to conduct a PPM, weight tickets, advance of funds, etc.: April 27 at 7 a.m. and 6 p.m.; May 25 at 7 a.m., 2 p.m. and 6 p.m.; and June 29 at 7 a.m. and 2 p.m.

There are two steps to attend a webinar, as follows:

- 1) To hear the webinar, dial into the conference line at 866-914-8369, participant code 6183853#
- 2) To see the presentation, use the following directions depending on what device is being used:

- For a cell phone or tablet, download the GoToMeeting application. Once GoToMeeting is installed on the device, find the session with the identification number 166349037.
- For a computer, go to: www.gotomeeting.com/meeting/join-meeting and enter session identification number 166349037. If using a government computer on the NMCI network, the recommended web browsers are Chrome or Firefox.

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COURTESY PHOTO

Service members from Walter Reed National Military Medical Center and employees from Department of Health and Human Services in Rockville take a photo before starting their medical support for the 2017 Presidential Inauguration in Washington, D.C., Jan. 20. WRNMMC provides medical support to special security events throughout the National Capital Region, which include but are not limited to presidential inaugurations and inaugural events, State of the Union addresses, Memorial Day events at Arlington National Cemetery, state funerals and any other events that have a large government presence with expected high-risk security concerns.

Beyond The Walls: Walter Reed Bethesda Supports National Special Security Events

By Megan Garcia
WRNMMC Public Affairs

In conjunction with the Fort Belvoir Community Hospital, Walter Reed Bethesda provides medical support, in the form of advanced trauma life support teams or advanced cardiac life support teams, to national special security events (NSSE) throughout the National Capital Region.

These events include presidential inaugurations and inaugural events, State of the Union addresses, Memorial Day events at Arlington National Cemetery, state funerals and any other events that have a large government presence with expected high-risk security concerns.

One team can consist of five to 12 people, which entail one to two providers, one to two registered nurses, a senior enlisted advisor and medical specialists or corpsman.

Most recently, approximately five teams from WRB supported the 2017 Presidential Inauguration with the main focus of supporting the military personnel involved with medical care should any emergencies arise.

“It went pretty smoothly,” said Army Lt. Col. (Dr.) David Eigner, a pediatric doctor and the NSSE medical director of WRB. “There was a lot of coordination with other organizations because the inauguration is basically run by the Secret Service and The Department of Homeland Security. The medical care was pretty simple. It’s just coordinating and learning how you fit into a multi-agency picture.”

Eigner said there were eight tents along the inauguration route and each team worked out of the various tents.

He added overall he was proud of the way everyone adapted and overcame the various changes that came with such a large, historic event.

“Walter Reed does a lot of great things to support our government’s function, and we’re proud to do that, and we’re proud to do this on top of everything else we do. It’s one of the things that makes us different,” Eigner said.

Army Sgt. 1st Class Brandy Navarijo, the senior enlisted leader for medical nursing services for the department of nursing and a NSSE team leader, has participated in seven national special security events, and she also participated in this year’s inauguration.

“To be in the military, you’re serving your country

regardless; but to be out there doing events, to be able to say you are a part of history, I feel like I’m really giving back,” Navarijo said.

Navarijo added everyone involved in these types of events are always enthusiastic and excited to provide support.

Behind the scenes to make sure everything runs smoothly, Navy Lt. Thomas Vaughn, the department chief for operations management, also assists with NSSE operational and administrative functions.

Vaughn, who maintains the team roster, helps determine the types and number of teams to send out to the different events. He also works with the emergency management department, the information technology department and logistics to ensure the teams have everything they need such as medical aid kits, communications devices and vehicles.

Although he hasn’t participated in any events himself, he attends all the rehearsals to help prepare the teams, and like Navarijo and Eigner, Vaughn agrees it’s a special part of Walter Reed Bethesda’s mission.

“I think it’s just great,” Vaughn said. “It’s history. It’s just an amazing thing to be a part of.”



PHOTO BY MC3 WILLIAM PHILLIPS

Rear Adm. David Lane, director, National Capital Region Medical Directorate, speaks to a crowd during Naval Support Activity Bethesda's Sexual Assault Awareness and Prevention proclamation signing April 4. April is Sexual Assault Awareness and Prevention Month across the DoD.

NSAB, Tenant Commands Dedicated to Eliminating Sexual Assault

By Andrew Damstedt
The Journal

Senior leaders from various commands at Naval Support Activity Bethesda (NSAB) came together and signed a proclamation April 4 in support of Sexual Assault Awareness and Prevention Month.

"We have an opportunity and a responsibility in the military to show our civilian counterparts how we can attack this problem and make a difference," said Rear Adm. David Lane, director, National Capital Region Medical Directorate.

Commanding Officer Capt. Marvin L. Jones said he would like all cases of sexual assault eliminated.

"We have some of the sharpest people on this installation working on this program," said Jones, pointing out Priscilla DePinto, NSAB sexual assault response coordinator (SARC), and employees in the installation's Sexual Assault Prevention and Response Office (SAPR) and Sexual Harassment/Assault Response and Prevention (SHARP) programs. "Our goal, my

goal, is to put them out of business ... I'd rather see us eradicate sexual assault amongst our ranks and have them doing something else"

As the commander of the Navy medical troops at Walter Reed National Military Medical Center (WRNMMC) and Ft. Belvoir and court martial convening authority, Lane said he was sad to report eight cases of sexual assault in the past year.

"So that's in our community, amongst colleagues and associates and friends," Lane said. "The power of attacking this and eliminating it – as Capt. Jones said – it really rests among all of us. I urge all of you to rededicate yourselves to putting our SAPR and SHARP personnel out of business. This is just a scourge on our society and on our military."

Hospital Corpsman 2nd Class Shannon Sensenig, SAPR victim advocate, read the proclamation at the ceremony.

"There's compelling evidence that we can be successful in reducing sexual harassment and sexual assault at Naval Support Activity Bethesda through prevention,

education, increased awareness, bystander intervention and holding perpetrators who commit acts of sexual assault or sexual harassment responsible for their actions," Sensenig read.

Throughout the month, there will be several events hosted by SAPR and SHARP offices on the installation, including a Strike Out event April 12 from 11 a.m. to 2 p.m. at the NSAB Bowling Center; Denim Day, April 26 where everyone is encouraged to wear denim and walk the track in front of the flag pole starting at 11:30 a.m.; and a relay race April 29 at the MWR Sports Complex Track. There will also be a lunch-and-learn series emphasizing supporting LGBT members April 6 and April 20 in the Memorial Auditorium.

Sensenig said there will be booths at various locations on base during the month to inform people of the available resources to help sexual assault victims and their families.

"We're here to support all victims of sexual assault, whether something recent or happened in the past," Sensenig said. "We can have

service members, family members, come to us at any time and make those reports confidentially and we can provide them the support and services that are available."

He said the victim advocates are available to help sexual assault victims by accompanying them to medical appointments or emergency room, set up behavioral health appointments with counseling or group therapy sessions for survivors of sexual assault.

Service members can report a sexual assault as either unrestricted or restricted. An unrestricted report notifies the command and law enforcement, and triggers health care and advocacy services for the victim. A restricted report remains confidential and lets a person access health care and advocacy services without notifying the command or law enforcement.

The SAPR Victim Advocate 24/7 call line is 301-442-8225, and the SARC 24/7 call line is 301-442-2053. The DoD Safe Helpline for confidential victim assistance is 1-877-995-5427 or www.safehelpline.org.



PHOTOS BY MC3 WILLIAM PHILLIPS

Naval Support Activity Bethesda (NSAB) Commanding Officer Capt. Marvin L. Jones speaks to a crowd during a Sexual Assault Awareness and Prevention proclamation at NSAB April 4.



A crowd of service members and civilians listen to a speech at Naval Support Activity Bethesda's Sexual Assault Awareness and Prevention Month proclamation.



Army Capt. David Ravenscraft gives an invocation before the Sexual Assault Awareness and Prevention Month proclamation signing at Naval Support Activity Bethesda April 4.



A Marine learns more about what the DoD Safe Helpline offers DoD personnel. April is Sexual Assault Awareness and Prevention Month across the DoD.



PHOTOS COURTESY PATSY JACKSON

Attendees of a Gold Star Spouse and Children's Luncheon pose for a group photo April 1 at the USO Warrior and Family Center at Bethesda.

USO Hosts Gold Star Family Luncheon

By Andrew Damstedt
The Journal

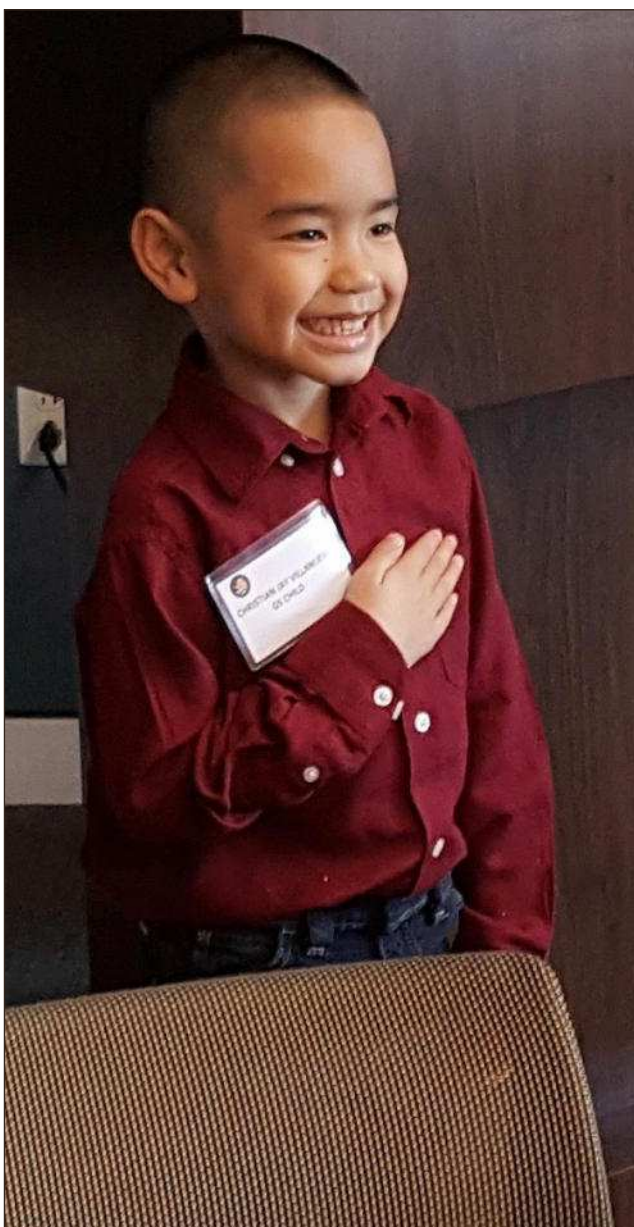
The USO Warrior and Family Center at Bethesda hosted a Gold Star Spouses and Children's luncheon April 1 to recognize the families of fallen and deceased service members who died while on active duty. Forty-four people attended the luncheon of which 14 were Gold Star family members from the Naval District Washington (NDW) area, according to Patsy Jackson, Navy Gold Star Program, NDW regional coordinator.

Commanding Officer Capt. Marvin L. Jones spoke about the promise the Navy made to keep Gold Star families to the Navy. Raina Taylor, D.C. Gold Star Wives chapter president, spoke about the history of the program and provided resources and promoted service activities the D.C. chapter does. Lisa Garcia, an Army Corps of Engineer human resources representative, gave resume tips.

Each Gold Star Spouse received a yellow carnation with a royal blue ribbon and a mini planter filled with forget-me-nots seeds to plant in honor of their loved ones, Jackson said. Each year, April 5 is designated as Gold Star Wives Day and this was the third year that the USO hosted the luncheon in Bethesda, Jackson said.

The Gold Star program's mission is to serve Gold Star families by providing resources that promote resiliency and keep the families connected to the Navy as long as they desire.

"It's an honor to provide the services to our Gold Star family members," Jackson said.



Christian Villanueva, Gold Star Son, recites the Pledge of Allegiance during the Gold Star Spouse and Children's luncheon April 1.



Naval Support Activity Bethesda Commanding Officer Capt. Marvin L. Jones cuts the cake with Gold Star Spouse Mae Villanueva and her children, Christian and Eleya Villanueva, during a Gold Star Spouse and Children's Luncheon April 1. The Villaneuvas' husband and father, Navy Chief Petty Officer Christian Jay Villaneuva, died in Jan. 2011.



PHOTO BY BERNARD S. LITTLE

Leadership team members from Walter Reed National Military Medical Center, Pediatrics and Pharmacy departments cut the ribbon to open the new Children's Center Pharmacy on the 4th floor of the America Building March 28.

Children's Center Pharmacy Opens

By Bernard S. Little
WRNMMC Public Affairs

Leadership team members from Walter Reed National Military Medical Center, Pediatrics and Pharmacy departments cut the ribbon to open the new Children's Center Pharmacy on the 4th floor of the America Building March 28.

In top photo, from left are Walter Reed Bethesda Command Master Chief Tyrone Willis; Navy Lt. Cmdr. Gloria Garner, clinical pharmacist; Army Maj. (Dr.) Autumn Richards, Children's Center pediatrician; Air Force Col. (Dr.) Thomas Newton, Children's Center director and chief

of pediatric hematology/oncology; and Army Col. Michael S. Heimall, WRNMMC director.

"We want to achieve better health outcomes for our patients," Richards said. "The pharmacy is an integral part of making sure our patients can achieve those health outcomes."

Heimall explained the new pharmacy is part of the medical center's ongoing efforts to better educate and engage patients in their health care.

"Having this dispensary here for the convenience of our patients is really an important step forward and adds to the overall patient experience. It's a commitment we have to taking care of our extended family."



PHOTO BY BERNARD S. LITTLE

Pharmacist Ravi Munshi (left) and pharmacy technician Sarah K. Han discuss operations in the new Children's Center Pharmacy in Pediatric Primary Care following a ribbon cutting ceremony March 28.

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Study Sheds Light on Prognosis of mTBI Symptoms for Returning Soldiers

By Sarah Marshall
USU Public Affairs

Nearly 50 percent of recently-deployed Soldiers who sustained a mild traumatic brain injury reported post-concussive symptoms – like headaches, sleep disturbance, and forgetfulness – three months after returning from deployment, according to a study published March 17 in *Neurology* by researchers at the Uniformed Services University of the Health Sciences (USU), and the Defense and Veterans Brain Injury Center.

A mild traumatic brain injury, also referred to as mTBI or concussion, is the most prevalent form of brain injury among service members returning from the wars in Afghanistan and Iraq. To better understand the prevalence and prognosis of symptoms associated with this common deployment-related injury, the team of researchers reviewed data from about 1,500 Soldiers who had been non-medically evacuated from Afghanistan and Iraq to two military bases between 2009 and 2014 – all of whom were screened for mTBI. Of those who were found to have sustained mTBI, about half (47%) reported at least one severe or very severe post-concussive symptom three months post-deployment. The most commonly reported symptoms were sleep problems, forgetfulness, irritability, headaches, and trouble concentrating.

The large, longitudinal study, “Epidemiology and Prognosis of mTBI in Returning Soldiers: A Cohort Study,” found

“A mild traumatic brain injury, also referred to as mTBI or concussion, is the most prevalent form of brain injury among service members returning from the wars in Afghanistan and Iraq.”

that these Soldiers were nearly twice as likely as soldiers without a recent mTBI to report one or more post-concussive symptom, at their three-month follow up. They were also nearly twice as likely as other soldiers to report receiving rehabilitative services. Most soldiers in the study also reported having experienced one or more TBI before their most recent deployment – either before joining the military or during an earlier deployment, according to the researchers.

Consistent with prior research, this study also found many of these soldiers with mTBI reported concurrent health issues, such as post-traumatic stress and bodily pain in locations other than the head or neck, and these factors were also related to the later likelihood of reporting post-concussive symptoms.

“We hope that by better defining the prevalence and prognosis of the broad array of symptoms associated with deployment-related mTBI, we can understand the extent of these problems and whether they persist or improve over time, not to mention the opportunity to offer our service members a better understanding of this injury,”

according to study author Dr. Ann Scher, a professor in USU’s Preventive Medicine and Biostatistics Department.

Dr. Karen Schwab, first author and researcher with the Defense and Veterans Brain Injury Center and USU affiliated faculty member, added, “These findings can also lead to more focused medical follow-up after concussion, and to further research on the outcomes of military concussion.”

The study was funded by the congressionally-mandated Directed Medical Research Programs with additional support provided by USU’s Center for Neuroscience and Regenerative Medicine, Defense Medical Research and Development Program, and the Defense and Veterans Brain Injury Center. USU researchers collaborated with colleagues at the Defense and Veterans Brain Injury Center, Silver Spring, Md., Evans Army Community Hospital, in Fort Carson, Colo., Rocky Mountain Mental Illness Research Education and Clinical Center, Denver, Colo., the University of Colorado, and the Intrepid Spirit Defense and Veterans Brain Injury Center, Fort Bragg, N.C.



PHOTOS BY MC2 HANK GETTYS

Master-at-Arms 2nd Class Veronica Robinson speaks to a crowd at Naval Support Activity Bethesda's Women's History Month celebration March 29. The celebration highlighted women's service members achievements.



Master Chief Hospital Corpsman Alma Robinson speaks to a crowd at Naval Support Activity Bethesda's Women's History Month celebration March 29. The celebration highlighted women's service members achievements.

Women's Military Milestones Praised at NSAB Ceremony

**By Andrew Damstedt
The Journal**

Strides women have made in the U.S. military were celebrated at a ceremony at Naval Support Activity Bethesda (NSAB) March 29 as part of Women's History Month.

"The barriers are off," said Navy Command Master Chief Alma Robinson, guest speaker at the event. "We are equally qualified, dedicated and it is very important to recognize that our gender does not limit our military."

Robinson highlighted a few milestones of women in the military from the 1900s until present day, including:

- In 1901, the Army Nurse Corps was established.
- During the Korean War, more than 500 Army nurses served in combat.
- In 1961, Bertha Peters Billeb became the first woman to be promoted to Sergeant Major.
- In 1976, women were admitted to service academies.
- In 2015, the first female Afghan pilot, Capt. Niloofar Rahmani, flew in a Blue Angels' jet.

"Women in the (U.S.) military represent 15 percent of the active duty in the military," said Robinson. "I'm very fortunate to be one of the 15 percent."

While women weren't allowed to enlist in the Navy until World War I, Navy Ensign Cyndele McVeigh said women have been involved in the military since the country's founding.

"Women in the military, in particular, have played pivotal roles in defining who we are as a people and as a nation," she said.

As an engineer in the military, McVeigh said she works in a male-dominated field. Her graduating class had five women across three engineering disciplines.

"Yet never once have I ever questioned whether I

could be an engineer, a military officer or whether I could do my job as well as my male counterparts," McVeigh said. "This is the hope that I have for all people, that the thought of your gender never prohibits you from accomplishing greatness."

She said it's the duty of women in the military today to continue the movement of generations of women in the past.

"To strive toward progressiveness, acceptance

and inclusion; to make a better world for women who come after us," she said. "In the words of retired Army Gen. Ann Dunwoody, the first four star woman in the United States Armed Forces: 'Today woman are in combat; that is just a reality. Thousands of women have been decorated for valor — have given their lives for our country. Today, what was once a band of brothers has truly has become a band of brothers and sisters.'"

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Walter Reed Bethesda, USU Host Trauma Symposium

By Bernard S. Little
WRNMMC Public Affairs

Walter Reed National Military Medical Center, in partnership with the Uniformed Services University, hosted the 2017 Trauma Symposium in the National Intrepid Center of Excellence Auditorium March 30.

The American College of Surgeons certified WRNMMC as a Level II Trauma Center in 2013, acknowledging its capabilities to initiate definitive care for all injured patients. Elements of Level II Trauma Centers include 24-hour immediate coverage by general surgeons, as well as coverage by the specialties of orthopedic surgery, neurosurgery, anesthesiology, emergency medicine, radiology and critical care. In addition, the Level II Trauma Center provides trauma prevention and continuing education programs for staff, as well as incorporates a comprehensive quality assessment program.

"We have, over the last 14 years, developed a trauma system within military medicine that is absolutely phenomenal, and [it] has had great success," said WRNMMC Director Army Col. Michael S. Heimall. He explained it's essential the military trauma system maintains this proficiency despite the current "lull in kinetic activity" and decline in combat casualties, "because it is going to spike again."

"We're going to enter a new paradigm," Heimall continued. He said for the last 14 years, during the better part of the war in Iraq and Afghanistan, it has taken an average of 26 minutes to get a combat casualty from the point of injury to operative care. "If we got the patient [to that care] in 26 minutes to under an hour, the patient had [about] a 97 to 98 percent survival rate...the highest ever during a war."

"The next place we go fight, we're not going to have that luxury [to evacuate casualties quickly to more advanced care]," Heimall said. He explained this will require health-care professionals to become even more innovative in order to provide exceptional trauma care in situations where the environments may be even more remote and austere, or the U.S. military and its allies do not possess the air superiority to easily evacuate casualties for higher levels of care.

Such situations will also require effective leadership, and keynote speaker at the symposium, retired Brig. Gen. (Dr.) Luis Fernandez, stressed leaders must set the example for the teams, not only by what they say, but also by how they conduct themselves, what they do and how they are perceived by others. "You need to know who your people are, and you need to be looking out for them," said the general, who specializes in trauma surgery and surgical critical care. As commanding officer of the Texas State Medical Brigade, he was instrumental in ensuring that evacuees of hurricanes Katrina, Rita, Gustav and Ike received excellent medical care in special needs shelters manned by Texas State Guard Soldiers.

He explained two important principles of leadership are to "know your job and have a solid familiarity with your subordinates' jobs," and "search for ways to guide your organization to new heights." Also, "when things go wrong, do not blame others. When you win, the team wins; when you lose,



PHOTO BY BERNARD S. LITTLE

Walter Reed National Military Medical Center trauma surgeon Navy Capt. (Dr.) Carlos Rodriguez (right) thanks retired Brig. Gen. (Dr.) Luis G. Fernandez for serving as the keynote speaker during the Walter Reed/Uniformed Services University 2017 Trauma Symposium March 30 at the medical center.

the leader takes the blame, not the team. Internally, you can critique [a team member], but to the outside world, the leader takes the blame. That's your job."

Maintaining a sense of calm, especially when situations may be dire, such as in the operating room if a patient crashes, is also important for leaders, Fernandez added. "If you lose it, the whole team could lose it."

Guest speaker at the symposium, Dr. Thomas Scalea, physician-in-chief at the R Adams Cowley Shock Trauma Center at the University of Maryland Medical Center in Baltimore, explained emergency medicine, as an independent medical specialty, is relatively young with trauma becoming a specialty during the 1990s when people were formally trained to provide that care. Prior to that, emergency departments were generally staffed by physicians of various specialties on staff at the hospital on a rotating basis.

Scalea now trains a number of residents from WRNMMC at the University of Maryland Shock Trauma Center. During the symposium, he discussed operative management of complex liver injuries, explaining "hesitation and loss of composure kills" in such trauma cases. "We are training a generation of surgeons who have done very few big liver cases, [which] is neither bad nor good. Future generations will use damage control more often than I would. This evolution may be associated with increased survival, but likely more frequent and different complications."

Several additional topics discussed during the symposium included challenges in implementing ideal spinal cord injury treatment paradigms downrange; treating casualties of the Syrian



PHOTO BY BERNARD S. LITTLE

Dr. Thomas Scalea, physician-in-chief at the R Adams Cowley Shock Trauma Center at the University of Maryland Medical Center in Baltimore, serves as guest speaker during the Uniformed Services University/Walter Reed Surgery Trauma Symposium in the National Intrepid Center of Excellence auditorium March 30.

Civil War; thoracic approaches and incisions; best practices in managing patients with an open abdomen; indications for operative rib fixation; bring precision medicine to the critically ill; the Department of Defense Trauma System; transforming surgical training with simulation; and male fertility and andrology issues with combat genitourinary trauma warriors.

Heimall said his hopes are the trauma symposium expands to include more medical facilities and institutions globally. He added this was one of the first symposium live webcast out of the medical center to other health-care facilities, and providers, including NATO partners from around the globe who signed up and took the assessments following the topics, could receive continuing education credit.

Rose Mologne: Volunteering With ARC After More Than 44 Years

By Joe Nieves
WRNMMC Public Affairs

In 1973 at then Fitzsimons Army Medical Center in Aurora, Colorado, Rose Mologne embarked on a journey of volunteerism with the American Red Cross that would span more than 44 years, including over 38 years at the former Walter Reed Army Medical Center (WRAMC) from 1983 until 2011.

When WRAMC joined forces with the National Naval Medical Center to form Walter Reed National Military Medical Center in 2011, Mologne continued volunteering with the ARC at the new facility.

“Rose mainly visits with patients and staff the days that she is in, but she always comes to ask first if there is anything we need for her to do,” said Marin Reynes, senior station manager for the ARC at WRNMMC. “She often fills in for the Comfort Cart [taking toiletries, snacks, books, DVDs and other items throughout the hospital for patients and their families], and Coffee Morning [providing a continental breakfast to beneficiaries, families and visitors] if we have volunteers out that day. She loves making deliveries of basic need items for patients. Rose...does it all.”

Originally from the small town of Connellsville in southwest Pennsylvania, Mologne graduated from Penn State with a degree in nutritional sciences. She worked

as a dietitian at the University of Pittsburgh Medical Center where she met her future husband, the late Army Maj. Gen. (Dr.) Lewis Aspey Mologne, then a medical student at the university's school of medicine. They married June 18, 1960 and had five children, three sons and two daughters.

The general would complete his internship and residency in general surgery at WRAMC, and have follow-on assignments at Walter Reed, the Walter Reed Army Institute of Research, and in Germany. He was named chief of general surgery at Fitzsimmons in 1973, where Rose Mologne began volunteering with the ARC.

“I always wanted to be an ARC volunteer [and] we did not have such a thing in the little town I grew up in,” she said.

She added her more than four decades of volunteerism comes from a desire to want to give back. “I have had such a good life in the military and I want to pay back for some of that,” she explained.

“I have always had strong military ties, since 1960, and strong volunteers ties...it's just part of my makeup to help people,” she continued.

Her husband commanded WRAMC from 1983 to 1988, when his reputation as a “Soldier's General” rose for improving the standard of living for those assigned and working at Walter Reed, especially service members and their families. Volunteers for the Red Cross were important part in this effort, and always

had been at WRAMC, she explained.

Rose Mologne credits her husband for encouraging her to continue volunteering with the ARC even more so after he became the WRAMC commanding officer and challenges increased. “It was easy for me to go along on that path with him. He was an outstanding surgeon; he absolutely loved the Soldiers and they loved him.”

The general died from cancer in August 1988, three weeks after relinquishing command of Walter Reed, but Rose Mologne's commitment to the military and volunteering has not ended.

“Everyone at Walter Reed knows Mrs. Rose Mologne, and if they don't, they should,” Reynes stated. “She's a dear friend to her fellow volunteers, and a great laugh for patients, families and staff.”

Reynes recalled Rose Mologne sharing with her a quote from a 1903 speech made by President Theodore Roosevelt. He said, “Far and away the best prize that life has to offer is the chance to work hard at work worth doing.” The Red Cross senior station manager said this quote aptly describes Mologne and many of the ARC volunteers, who in total contributed more than 72,100 hours to support service members, veterans and their families receiving care or working at WRNMMC and Naval Support Activity Bethesda during 2016.

“I think my volunteering now, and I'm 85, is a good example,” Mologne said. “It's for younger people to maybe emulate.”



PHOTO BY JOE NIEVES

Rose Mologne shows one of her early American Red Cross volunteer uniform she wore when she served at Walter Reed Army Medical Center from 1983 to 2011. She continues to volunteer with the ARC at Walter Reed National Military Medical Center.

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Family Members’ Deaths Motivates WRNMMC Employee’s Weight Loss

By Megan Garcia
WRNMMC Public Affairs

The death of several family members and a chance encounter with a stranger on a high school track started Wendall Drakeford on a journey to lose more than 100 pounds at the age of 26.

“My grandmother died in 1993. My grandfather passed away in 2002. My mother passed away in 2005. My aunt passed away in 2006, and all of it was related to diabetes and weight problems,” said Drakeford, who works as a food service worker at Walter Reed National Military Medical Center. “I decided in 2007 it was time for me to get it together. Everyone was dying.”

Aside from losing his family, Drakeford, who himself had been diagnosed with juvenile diabetes at the age of 14, and who weighed 316 pounds in 2007, said the physical pain of carrying around all of his weight was wearing on him.

“My knees were hurting, joint pain, sweating when I was eating; all the fat stuff. I had to get rid of it,” Drakeford said.

Drakeford laughed as he recalled his first attempt at exercising on a high school track in Northwest D.C.

“I thought I could do more than I could do. I started jogging, but I got all winded, so I started walking,” he said.

Drakeford saw another man on the track who seemed out of place. In his eyes, the

man seemed pretty fit and in shape, but something else grabbed his attention even more.

“He was picking up stuff out the grass and eating it, and I was curious, so I just started talking to him,” Drakeford said. “He was like, ‘Man, don’t eat the regular grass. You can eat the clovers because they have nutritional value.’”

Drakeford learned the man was a raw foodist and was following a special type of vegetarian diet. He told Drakeford if he wanted to learn about how to eat healthier, join him on the track throughout the week, and so Drakeford did.

“He became my mentor, and he doesn’t even know it,” Drakeford said. “Watching him eat right and exercise was one of the main reasons I decided to follow him. He wasn’t just talking it. He was actually doing it.”

One day he just stopped seeing the man, but that didn’t deter Drakeford from continuing with his daily routine.

“I was exercising on the track about an hour to two hours a day, five days a week,” Drakeford said. “I took out sodas and juices because the man said you had to stop the sugar. I knocked the bread out, and I would substitute lettuce for the bread, so for like my cheeseburgers, I would eat the meat between the lettuce. Same rules applied for my hot dogs.”

Eventually he graduated from walking to jogging. He also began to add pull-ups, sit-ups and dips throughout his sessions.

He continued this same regime for the next three years; even incorporating visits to the gym. He was able to shed 69 pounds, landing him at 250 pounds. However, after doing the same thing over and over, he noticed he stayed stagnant at that weight.

“I had to do something different, and that’s when I started juicing,” Drakeford said.

He started watching a popular certified detoxification specialist on YouTube who talked about how various fruits and vegetables worked in certain areas of your body.

Drakeford used fruits and vegetables such as apples, beets, kale, oranges, ginger and grapefruits in his smoothies and soon started to come down from the 250 pounds he had been stuck at.

Now, 10 years from the day he decided to change his life, he’s been able to keep the weight off by maintaining a healthier diet.

“I feel better than I ever felt before,” said Drakeford, who is now 36 and weighs 197 pounds. “I can do so much more than I ever could do before when I was heavy. My knees don’t hurt, and I feel confident too.”

Surprisingly Drakeford said he’s done losing weight and instead wants to gain about 20 pounds, but only to gain muscle.

He vows to never get back to where he was because he also has a sister who he says he has to make sure he stays around for her.

“She was 10 when my mother passed away, and that’s even more so why I knew I had to step up,” Drakeford said.



PHOTO BY MEGAN GARCIA

Wendall Drakeford, a food service worker at the Walter Reed National Military Medical Center, poses for a quick photo before getting back to work in the hospital’s galley April 3. In 2007, Drakeford started a journey to lose as much weight as possible after losing four family members in the course of 13 years due to weight problems and diabetes. Drakeford, who weighed 316 pounds, now weighs 197 pounds.

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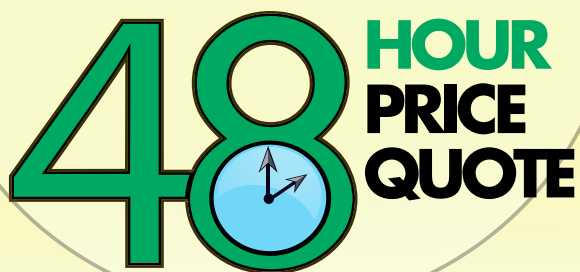
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Café 8901 Offers Colorful, Healthy Menu Items

By Kalila Fleming
WRNMMC Public Affairs

Lightly-roasted cod, golden brown rice, crisp broccoli, and delicatessen-styled sandwiches are a few of the items offered in Café 8901 at Walter Reed National Military Medical Center on the lower level of Building 9.

"[Our] food operations feed about 4,000 people a day, Monday through Friday, providing an 18.5 hour meal service," said Army Col. Melanie Craig, director of Nutrition Services at WRNMMC.

Café 8901 patrons include patients, military members, their families, federal employees and visitors, Craig continued. To accommodate the volume of customers, the dining facility has seven venues for patrons to choose from, she added.

"We offer the pizza bar, World Bistro, Fit and Flavorful, the Chef's Table, the Grille, and our deli and salad bars," she explained.

Executive Chef, Ted Stolk said the "Fit and Flavorful" venue offers luncheon meals that are 550 calories or less.

"We've actually had service members who came to me, ate this meal for three months, and [reported] they've lost a lot of weight and feel a whole lot

better," Stolk said. "We are looking at fat and calorie content to provide low fat, healthy food options every day."

Craig added food operations dietitians and chefs conduct menu meetings, reviewing satisfaction surveys from customers to see what they say about the menu, and making adjustments to try and incorporate [those suggestions] in future menus at Café 8901.

Also from those meetings, ideas for the traditional holidays, celebratory ethnic and other holiday menus are developed.

"We try to highlight those times that we celebrate as a country, for example Thanksgiving and Christmas. Those meals are very popular, and a little more upscale and different from our usual daily fare and operations that we normally prepare," Craig said. She added accommodations are also made to meet the dietary needs of inpatients and meals served on the wards.

Army 2nd Lt. Anna Cardenas, a dietetic intern at WRNMMC, said, "Food is medicine...it can make or break your health [essentially being] the greatest form of medicine or the slowest form of poison."

For more information regarding the menus in Café 8901, call 301-295-5360.



FILE PHOTO BY KALILA FLEMING

Executive Chef Ted Stolk said staff members in the Directorate of Nutrition Services at Walter Reed Bethesda look at fat and calorie content to provide low fat, healthy food options every day in Café 8901 on the lower level in Building 9.

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